RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS PAGE 1/3

FEC FORM 2 STATEMENT OF CANDIDACY

11 NOV -8 AM 11: 17

(a) Name of Candidate (in full)						*
(b) Address (number and street)	Chook ii	f addraga chae	and	2. Candidate's FEO	Identification N	hanh ar
7143 Steeplechase Way	☐ Check if address changed			S8MI00281	idenulication N	umber
(c) City, State, and ZIP Code	·			3. Is This	New	Amended
Lansing		MI 4	18917	Statement	(N) OR	(A)
4. Party Affiliation	5. Office Sought		†	strict of Candidate		
DEMOCRATIC PARTY	Senate		MI	00		
DE	SIGNATION O	F PRINCIP	AL CAMPAIG	N COMMITTEE		
7. I hereby designate the following nar	ned political committe	e as my Princ	ipal Campaign Com		election)	n(s).
NOTE: This designation should be f	iled with the appropria	ate office listed	I in the instructions.			
(a) Name of Committee (in full)	-	· · · · · · · · · · · · · · · · · · ·				**************************************
Stabenow for U.S. S	Senate					
(b) Address (number and street) PO Box 4945						
(c) City, State, and ZIP Code						
East Lansing			МІ	48826		
 I hereby authorize the following name candidacy. NOTE: This designation should be fit 				·	·	·
(a) Name of Committee (in full)	17****				•	
Michigan Senate 20	12					
(b) Address (number and street) 120 Maryland Ave NE		****	··		1	
(c) City, State, and ZIP Code						
Washington			DC	20002		
I certify that I have example	mined this Statement	and to the bes	t of my knowledge a	and belief it is true, cor	rect and comple	te.
Signature of Candidate				Date		
Nellie to	terou	,—		11/01/2011		
NOTE: Submission of false, erroneous,			ect the person signi	ng this Statement to pe	enalties of 2 U.S	.C. §437g.
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				•	 FEC	FORM 2 (REV. 02/2009)

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)		Page 2 /
	THER AUTHORIZED COMMI Joint Fundraising Representatives)	ITTEES [ADDITIONAL]
I hereby authorize the following named committee, which is NOT my candidacy.	principal campaign committee, to receive	and expend funds on behalf of my
NOTE:This designation should be filed with the principal of	campaign committee.	
(a) Name of Committee (in full) Stabenow 2012 Victory Fund		
(b) Address (number and street) PO Box 4462		
(c) City, State and ZIP Code		,
East Lansing	MI 4	3826
	THER AUTHORIZED COMM Joint Fundraising Representatives)	ITTEES [ADDITIONAL]
I hereby authorize the following named committee, which is NOT my candidacy.	principal campaign committee, to receive	and expend funds on behalf of my
NOTE:This designation should be filed with the principal of	campaign committee.	
(a) Name of Committee (in full)	***************************************	
Texans for a Progressive Senate		
(b) Address (number and street) 426 C St NE		
(c) City, State and ZIP Code		
Washington	DC 20	0002
	THER AUTHORIZED COMM Joint Fundraising Representatives)	ITTEES [ADDITIONAL]
I hereby authorize the following named committee, which is NOT my candidacy.	principal campaign committee, to receive	and expend funds on behalf of my
NOTE:This designation should be filed with the principal of	campaign committee.	
(a) Name of Committee (in full)		
Women's Senate Victory Fund		•
(b) Address (number and street) 426 C St NE		
(c) City, State and ZIP Code		
Washington	DC 20	0002

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FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)		Page 3 /
	HER AUTHORIZED COMMITTEES int Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is NOT my pri candidacy.	ncipal campaign committee, to receive and expend funds	on behalf of my
NOTE:This designation should be filed with the principal car	npaign committee.	
(a) Name of Committee (in full)		. ,
CSB Victory		
(b) Address (number and street) 426 C St NE		,
(c) City, State and ZIP Code		
Washington	DC 20002	
	HER AUTHORIZED COMMITTEES int Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is NOT my pricandidacy.	incipal campaign committee, to receive and expend funds	on behalf of my
NOTE: This designation should be filed with the principal car	mpaign committee.	
(a) Name of Committee (in full)		
(b) Address (number and street)		
(c) City, State and ZIP Code		
	HER AUTHORIZED COMMITTEES int Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is NOT my pricandidacy.	ncipal campaign committee, to receive and expend funds	on behalf of my
NOTE:This designation should be filed with the principal car	npaign committee.	·
(a) Name of Committee (in full)		
(b) Address (number and street)		<u> </u>
(c) City, State and ZIP Code	· · · · · · · · · · · · · · · · · · ·	



Secretary of the Senate Office of Public Records P O Box 2517 Alexandria, VA 22301

HART SENATE OFFICE BUILDING SUITE 232 WASHINGTON, DC 20510-7116 PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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